

MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION P O BOX 2200, JEFFERSON CITY, MO 65105-2200

FORM **MO-96**

200___

TO DOM ZZUU, J	EFFERSON CITT, MO 03103-2200				_		
ANNUAL SUMMARY AND TRANSMITTAL OF MISSOURI FORMS MO-99 MISC.			(REV. 10-2000)				
NOTE: Enter the total numb	er of Federal 1099 NEC forms if substitut	ed for the MO. Forr	m MO-99 MISC	•			
ENTER		s are: (Place an	e: (Place an "X" in the proper boxes.)				
NUMBER OF DOCUMENTS		ORIGINAL CORRECTED		WITH TAXPAYER IDENTIFYING NO.		WITHOUT TAXPAYER IDENTIFYING NO.	
PAYER'S identifying number							
, ,	, address, and ZIP code above.	Mail to: Missouri Department of Revenue P.O. Box 2200 Jefferson City, Missouri 65108-2200 I have direct control, supervision or responsibility for filing this return and payment of the tax due. Under penalties of perjury, I declare it is a true, accurate and complete return. In the case of documents without recipients' identifying numbers I have complied with the requirements of the law by requesting such numbers from the recipients, but did not receive them.					
SIGNATURE		TITLE		DATE			
MO 860-1106 (10-2000)	This publication is available upo	n request in alterna	ative accessibl	e format(s).			
DIVISION OF TA P O BOX 2200, J	RTMENT OF REVENUE XATION AND COLLECTION EFFERSON CITY, MO 65105-2200 MARY AND TRANSMITTAL OF MISSO	DURI FORMS MO	9-99 MISC.	FORM MO-96 (REV. 10-2000)	2	200	
NOTE: Enter the total numb	er of Federal 1099 NEC forms if substitut						
ENTER All documents are: (Place an "X" i					"X" in the proper boxes.)		
NUMBER OF		OBIONIAL	000000000	WITH TAXPAY	ER ,	WITHOUT TAXPAYER	

NOTE: Enter the total number of Federal 1099 NEC forms if substituted for the MO. Form MO-99 MISC.							
ENTER	All documents	All documents are: (Place an "X" in the proper boxes.)					
NUMBER OF DOCUMENTS	ORIGINAL	CORRECTED	WITH TAXPAYER IDENTIFYING NO.				
PAYER'S identifying number							
Type or Print PAYER'S name, address, and ZIP code above.	penalties of perjur recipients' identify	Mail to: Missouri Department of Revenue P.O. Box 2200 Jefferson City, Missouri 65108-2200 I have direct control, supervision or responsibility for filing this return and payment of the tax due. Under penalties of perjury, I declare it is a true, accurate and complete return. In the case of documents without recipients' identifying numbers I have complied with the requirements of the law by requesting such numbers from the recipients, but did not receive them.					
SIGNATURE	TITLE		DATE				

MO 860-1106 (10-2000)

This publication is available upon request in alternative accessible format(s).

MISSOURI DEPARTMENT OF REVENUE DIVISION OF TAXATION AND COLLECTION P O BOX 2200, JEFFERSON CITY, MO 65105-2200 ANNUAL SUMMARY AND TRANSMITTAL OF MISSOUR	-99 MISC.	FORM MO-96 (REV. 10-2000		200			
NOTE: Enter the total number of Federal 1099 NEC forms if substituted for the MO. Form MO-99 MISC.							
ENTER	All documents are: (Place an "X" in the proper boxes.)						
NUMBER OF DOCUMENTS	ORIGINAL	CORRECTED	WITH TAXE		WITHOUT TAXPAYER IDENTIFYING NO.		
PAYER'S identifying number							
	penalties of perjury	Mail to: Missouri Department of Revenue P.O. Box 2200 Jefferson City, Missouri 65108-2200 have direct control, supervision or responsibility for filing this return and payment of the tax due. Under enalties of perjury, I declare it is a true, accurate and complete return. In the case of documents without					
Type or Print PAYER'S name, address, and ZIP code above. recipients' identifying numbers I have complied with the requirements of the law by requesting sometimes and provided in the recipients, but did not receive them.					s of the law by requesting such		
SIGNATURE	TITLE		DA	ΤΕ			
This publication is qualiful unon properties of consider format(s)							